### Case 1:05-cv-00019 Document 77.67 # 1900 \$ 1.9299674 Page 1 of 7



DIVI ON OF REVENUE AND TAXATION

Department of Finance

COMMONWEALTH GOVERNMENT OF THE NORTHERN MARIANA ISLANDS

SAIPAN, MP 96950



APPLICATION FOR	BUSINESS LICENSE
Pursuant to Title 4, §1503 of the Commonwealth Code and its acc to engage in or continue engaging in the commercial operation o calendar year	companying regulations, the undersigned hereby make an application of POKER MACHINES □ AMUSEMENT MACHINES for
In consideration for the issuance of such license, the applicant propossible.)	ovides the following information: (Answer each item as accurately as
1. Applicant's Full Name: JUNG JIN CORP.	
Provide to the Color of the Color of the Color and Color of the Color	3428 C.C.
3. Name of Business: Tune Jin Core.	
4. Business' mailing address in CNMI:	
5. Form of Business:   Sole Proprietorship  (Check one)   Association	☐ Partnership ☐ Non-profit Organization
6. Business phone no.: 235 - 432/ (If none, give number presently used)	7. Location of Business in CNMI:
8. The Applicant is the ☐ owner ☐ president ☐ other ☐ SecreTary ☐ (Specify)	□ Rota Chalen Kanon (village or area)  12 NUMBER OF MACHINES
	and correct. I further agree that any license to be issued will be granted and MC §1503, its accompanying regulations, and other laws and regulations of the
Signature of Applicant	Déte
BELOW FOR OF The Cashier certifies that the applicable license fee(s) have been paid.  Amount: \$ 36,000— Penalty:	FICIAL USE ONLY  Receipt No.: 99347
Interest: Total Fee(s) Paid: \$	Signature of Cashler Date
First Endorsement: The Enforcement and Regulatory Branch has reviewed this application and hereb (f disapproved, give reason(s):	으로 사용하는 경기를 받는 것이 되었다. 12일 : 12일 : 12
(1) A Hou Enforcement Officer Date	
First State of Revenue and Taxation approves disapproves	the issuance of the business license in the preceeding endorsement.

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Oirector Revenue and Taxation



# Poker Machine Quarterly Payment Schedule

### Name of Owner:

Game Room: License Number/Exp. Date:

Serial #

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7004-P-0084

112/04 - 4/0/21

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6636 2896 2894 2620 2897 2892 5632 2893 Tag # 50,000 Date - 1st Paymen **Payment** Initial 5-04 7. Chcbu Receipt # 07-07-04 2nd Payment 7.1.04 Payment Due Date Date 1058753 36,000. Receipt # 3rd Payment
Date 12 14 DI 10-1-00 うるわび Receipt # 4th Payment Payment Due Date 1.1.05 Date WH5811 Receipt #

license poker license fee shall be paid prior to issuance of a license. The remaining balance for that I understand that pursuant to 4 CMC §1503(c), a minimum deposit of 25% of the total annual nstallments. icense year shall be due on the first day of the month of each quarter and thereafter in equal Failure to comply with these provisions shall result in the revokation of the poke

Name and Signature of Applicant

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Date

DIV...SION OF REVENUE AND TAXALION
Department of Finance
COMMONWEALTH GOVERNMENT OF THE NORTHERN MARIANALSLANDS
SAIPAN, MP.96950

APPLICATION FOR	R BUSINESS LICENSE THE REPORT OF THE PROPERTY
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engage in or continue engaging in the commercial operation	companying regulations, the undersigned perepting a polication of POKER MACHINES AND AMUSEMENT MACHINES
alendar year	
n consideration for the issuance of such license, the applicant pr ossible.)	ovides the following information: (Answer each Item as accurately
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	CORP
2. Applicant's local mailing address: PCBoX	03428 C.K
Name of Business: J.A. Poker	
1. Business' mailing address in CNMI: POBOX	5034-4
5. Form of Business: ☐ Sole Proprietorship	□ Partnership
(Check one)	□ Non-profit Organization
6. Business phone no.:	7. Location of Business in CNMI:  Ø Saipan □ Northern Islands
(If none, give number presently used)	☐ Tinian (specify island)
3. The Applicant is the	□Rota
Downer □ president □ other:	(village or area)
(Specify)	NUMBER OF MACHINES
expeted upon the condition that I will fully comply with the requirement of 4 to ommonwealth Government of the Northern Mariana Islands.	CMC §1503, its accompanying regulations, and other laws and regulations of
- <del> </del>	<u>0}-0</u> 2-0
Signature of Applicant	Date/
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	FFICIAL USE ONLY
he Cashier certifies that the applicable license fee(s) have been paid.	FFICIAL USE ONLY
he Cashier certifies that the applicable license fee(s) have been paid.  Amount: \$	Receipt No.:
Amount: \$ 30.000 Penalty:	
Amount: \$ 30.000  Penalty: Interest:	
Amount: \$ 30.000 Penalty:	
Amount: \$	Receipt No.: 9697/ Signature of Cashler Date
Amount: \$ 30.000  Penalty: Interest: Total Fee(s) Paid: \$ 30.000  First Endorsement: The Enforcement and Regulatory Branch has reviewed this application and here	Receipt No.: 9697/ Signature of Cashler Date
Amount: \$ 30.000  Penalty: Interest: Total Fee(s) Paid: \$ 30.000  Tirst Endorsement: The Enforcement and Regulatory Branch has reviewed this application and here	Receipt No.: 9697/ Signature of Cashler Date
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Amount: \$	Receipt No.: 9697/ Signature of Cashler Date
Amount: \$	Receipt No.: 9697/ Signature of Cashler Date
Penalty: Interest: Total Fee(s) Paid: \$	Receipt No.:    Signature of Cashier   Date

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Director Revenue and Taxation

Poker Machine Juanelly Paymant Schad

Division of Revenue and Taxenor

Name of Owner.

License Number/Exp. Date:

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		Receipt#	ी/डिटानी	Amr. Paid	
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		Receipt#	ျား	Ant Paid:	
Payment Due Date	3rd Payment	Date	4/1/24		所による は 地震など
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nstallments. Failure to comply with these provisions shall result in the revokation of the poker icense year shall be due on the first day of the month of each quarter and thereafter in equal understand that pursuant to 4 CMC §1503(c), a minimum deposit of 25% of the total annual poker license fee shall be paid prior to issuance of a license. The remaining balance for that icense

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2 7 15 16 Name and Signature of Applicant

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Division of Re

Name of Owner:

License Number/Exp. Date:

La Corp / J.A. Puren 2004 1 - 0058 (3-2-04-5-305)

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nstallments. Failure to comply with these provisions shall result in the revokation of the poker icense year shall be due on the first day of the month of each quarter and thereafter in equal understand that pursuant to 4 CMC §1503(c), a minimum deposit of 25% of the total annual ooker license fee shall be paid prior to issuance of a license. The remaining balance for that

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Serial #

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Name and Signature of Applicant

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### DIVISION OF REVENUE AND TAXATION



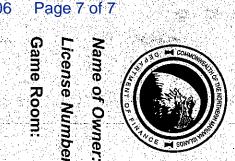
Department of Finance COMMONWEALTH GOVERNMENT OF THE NORTHERN MARIANA ISLANDS SAIPAN, MP 96950



### APPLICATION FOR BUSINESS LICENSE

Pursuant to Title 4, §1503 of the Commonwealth Code and its act to engage in or continue engaging in the commercial operation calendar year 2005-2004 beginning	companying regulations, the undersigned hereby make an application of 风 POKER MACHINES 「ロ AMUSEMENT MACHINES for ろうこう
In consideration for the issuance of such license, the applicant propossible.)	ovides the following information: (Answer each item as accurately as
1. Applicant's Full Name: Jung Jim Con	>
2. Applicant's local mailing address.	503418 C.K
3. Name of Business: Sun Poker	
4. Business' mailing address in CNMI:	200
5. Form of Business: ☐ Sole Proprietorship (Check one) ☐ Association	☐ Partnership.
6. Business phone no: 235 - 4321 (If none, give number presently used)	7. Location of Business in CNMI:  Saipan □ Northern Islands □ Tinian (specify island)
8. The Applicant is the	□ Rota Chzlz KwoZ
□ owner □ president ☑ other: Secrety (Spealty)	O NUMBER OF MACHINES
to be used, (the location must include the name and address of the es All amusement license fees shall become due and payable at A separate license certificate shall be issued for each class of ma of the license tags issued by Revenue and Taxation.	number of machines to be ilcensed, (C) the location where the machine is tablishment), and (D) the license tags issued by Revenue and Taxation, the time the license application is submitted to Revenue and Taxation. achine showing the serial numbers of machines licensed and the numbers of machines licensed and the numbers of and correct. I further agree that any license to be issued will be granted and CMC §1503, its accompanying regulations, and other laws and regulations of the
BELOW FOR OF	FICIAL USE ONLY
The Cashier certifies that the applicable license fee(s) have been paid  Amount: \$	Receipt No.: 1225594
Total Fee(s) Paid: \$ 30, 500	Signature of Cashier Date
First Endorsement: The Enforcement and Regulatory Branch has reviewed this application and here! If disapproved, give reason(s):	
	dy recommends. — approva — disappova — di tris desirios ilea iso.
(1) S(3) OS Enforcement Officer Date	greconneilos — appora — osappro o
(1) S 3 95 Enforcement Officer Date  Director of Revenue and Taxation approves disapproves	the issuance of the business license in the preceeding endorsement.

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## Holgen Machinier Quarterly-Payment Schedule venile and lawaline.

License Number/Exp. Date:

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の子の Tag # Date - 1st Payment 3 | 3 | 2 | 25 Payment Initial Receipt # 2nd Payment 55/4/ Payment Due Date Date ALL CALL Receipt # 3rd Payment <u>s</u> SQ [1] Payment Due Date Date るがあり 178855 Receipt # 4th Payment SOF SOF Payment Due Date Date

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